



STATE OF SOUTH CAROLINA
RESIDENTIAL PROPERTY CONDITION
DISCLOSURE STATEMENT



The South Carolina Code of Laws (Title 27, Chapter 50, Article 1) requires that an owner of residential real property (single family dwelling unit or a single transaction involving transfer of four dwelling units or less) shall provide to a purchaser this completed and signed disclosure statement prior to forming a real estate contract. This disclosure must be provided in connection with any sale, exchange, installment land sale, and lease with an option to purchase contract. This disclosure statement is not required in connection with transactions listed and exempted by South Carolina Code § 27-50-30.

Owners should answer the questions fully, honestly, and appropriately by attaching documents, checking a box for each check box question, and writing in the blanks on this disclosure statement.

If a question is answered “Yes” or asks for a description, then owner must explain or describe the issue or attach a descriptive report from an engineer, contractor, pest control operator, expert, or public agency. If owner attaches a report, owner shall not be liable for inaccurate or incomplete information in the report unless owner was grossly negligent in obtaining or transmitting the information. If owner fails to check “Yes” or make a disclosure and owner knows there is a problem, owner may be liable for making an intentional or negligent misrepresentation and may owe the purchaser actual damages, court costs, and attorney fees. If a question is answered “No” for any question, the owner is stating that owner has no actual knowledge of any problem.

By answering “No Representation” on this disclosure statement, the owner is acknowledging that they do not have the current knowledge necessary to answer the questions with either a “Yes” or “No” response. Owner still has a duty to disclose information that is known at the time of the disclosure statement. “No Representation” should not be selected if the owner simply wishes to not disclose information or answer the question. Selecting “No Representation” does not waive liability if owner is aware or subsequently becomes aware.

If a question is answered and subsequently new information is obtained or something changes to render the owner’s answer incorrect, inaccurate, or misleading (example: roof begins to leak), owner must promptly correct the disclosure. In some situations, the owner may notify the purchaser of the correction. In some situations, the owner may correct or repair the issue.

The owner shall deliver to the purchaser this disclosure before a real estate contract is signed by the purchaser and owner, or as otherwise agreed in the real estate contract. The real estate licensee must disclose material adverse facts about the property if actually known by the licensee about the issue, regardless of owner responses on this disclosure. Owner is solely responsible to complete this disclosure as truthfully and fully as possible. Owner and purchaser are solely responsible to consult with their attorneys regarding any disclosure issues. By signing below, owners acknowledge their duties and that failure to disclose known material information about the property may result in owner liability.

Owner must provide the completed disclosure statement to the purchaser prior to the time the owner and purchaser sign a real estate contract unless the real estate contract states otherwise. Owner should provide a signed copy to the purchaser and keep a copy signed by the purchaser.

A real estate contract, not this disclosure, controls what property transfers from owner to purchaser.

Owner: WWS (R&T) Purchaser () () acknowledge receipt of a copy of this page which is Page 1 of 6.
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Property Address (including unit # or identifier) 711 Burgess Rd
5414w street, SC 29145

Apply this question below and the three answer choices to the numbered issues (1-14) on this disclosure.

As owner, do you have any actual knowledge of any problem(s)* concerning?

*Problem(s) include present defects, malfunctions, damages, conditions, or characteristics.

<u>I. WATER SUPPLY AND SANITARY SEWAGE DISPOSAL SYSTEM</u>	Yes	No	No Representation
1. Water supply	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Water quality	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Water pressure	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Sanitary sewage disposal system for any waste water	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Has water softener

A. Describe water supply:	<input type="checkbox"/> County	<input type="checkbox"/> Private	<input type="checkbox"/> Community	<input type="checkbox"/> Other: _____
	<input type="checkbox"/> City	<input type="checkbox"/> Corporate	<input checked="" type="checkbox"/> Well	
B. Describe water disposal:	<input checked="" type="checkbox"/> Septic	<input type="checkbox"/> Private	<input type="checkbox"/> Other: <u>3 new drains installed 2014-75 ft. call</u>	
	<input type="checkbox"/> Sewer	<input type="checkbox"/> Corporate	<input type="checkbox"/> Government	
C. Describe water pipes:	<input type="checkbox"/> PEX	<input checked="" type="checkbox"/> PVC/CPVC	<input checked="" type="checkbox"/> Other/Unknown: <u>some galvanized</u>	
	<input type="checkbox"/> Copper	<input type="checkbox"/> Polybutylene	<input type="checkbox"/> Steel	

<u>II. ROOF, CHIMNEYS, FLOORS, FOUNDATION, BASEMENT, AND OTHER STRUCTURAL COMPONENTS AND MODIFICATIONS OF THESE STRUCTURAL COMPONENTS</u>	Yes	No	No Representation
5. Roof systems			
A. Approximate year that current roof system was installed: <u>unknown</u>			
B. During your ownership, describe any known roof system leaks, repairs and/or modifications with dates(s):	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Gutter systems <u>installed 2018</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Foundation, slab, fireplaces, chimneys, wood stoves, floors, basement, windows, driveway, storm windows/screens, doors, ceilings, interior walls, exterior walls, sheds, attached garage, carport, patio, deck, walkways, fencing, or other structural components including modifications			
A. Approximate year structure was built: <u>1920's</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
B. During your ownership, describe any structural repairs and/or modifications to the items identified in Question 7 with dates(s):			

<u>III. PLUMBING, ELECTRICAL, HEATING, COOLING, AND OTHER MECHANICAL SYSTEMS</u>	Yes	No	No Representation
8. Plumbing system (pipes, fixtures, water heater, disposal, softener, plumbing components)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Owner: [Signature] Purchaser () () acknowledge receipt of a copy of this page which is Page 2 of 6.
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9. Electrical system (wiring, panel, fixtures, A/V wiring, outlets, switches, electrical components)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. Appliances (range, stove, ovens, dishwasher, refrigerator, washer, dryer, other appliances)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11. Built-in systems and fixtures (fans, irrigation, pool, security, lighting, A/V, other)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12. Mechanical systems (pumps, garage door opener, filtration, energy equipment, safety, other)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13. Heating system(s) (HVAC components)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14. Cooling system(s) (HVAC components)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
A. Describe Cooling System:	<input checked="" type="checkbox"/> Central	<input type="checkbox"/> Ductless	<input type="checkbox"/> Heat Pump
B. Describe Heating System:	<input checked="" type="checkbox"/> Central	<input type="checkbox"/> Ductless	<input type="checkbox"/> Heat Pump
C. Describe HVAC Power:	<input type="checkbox"/> Oil	<input type="checkbox"/> Gas	<input checked="" type="checkbox"/> Electric
D. Describe HVAC system approximate age and any other HVAC system(s): <i>installed 2014</i>			

IV. PRESENT OR PAST INFESTATION OF WOOD DESTROYING INSECTS OR ORGANISMS OR DRY ROT OR FUNGUS, THE DAMAGE FROM WHICH HAS NOT BEEN REPAIRED, OR OTHER PEST INFESTATIONS

A. Describe any known present wood problems caused by termites, insects, wood destroying organisms, dry rot or fungus:

B. Describe any termite/pest treatment, coverage to property, name of provider, and termite bond (if any):

C. Describe any known present pest infestations:

V. THE ZONING LAWS, RESTRICTIVE COVENANTS, BUILDING CODES, AND OTHER LAND USE RESTRICTIONS AFFECTING THE REAL PROPERTY, ANY ENCROACHMENTS OF THE REAL PROPERTY FROM OR TO ADJACENT REAL PROPERTY, AND NOTICE FROM A GOVERNMENTAL AGENCY AFFECTING THIS REAL PROPERTY

Apply this question below and the three answer choices to the numbered issues (15-28) on this disclosure. As owner, do you have any actual knowledge or notice concerning the following:			
	Yes	No	No Representation
15. Violations or variances of the following: zoning laws, restrictive covenants, building codes, permits or other land use restrictions affecting the real property.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16. Designation as a historic building, landmark, site or location within a local historic or other restrictive district, which may limit changes, improvements of demolition of the property.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17. Easements (access, conservation, utility, other), party walls, shared private driveway, private roads, released mineral rights, or encroachments from or to adjacent real property.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Owner: *NO PEST* Purchaser () () acknowledge receipt of a copy of this page which is Page 3 of 6.
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18. Legal actions, claims, foreclosures, bankruptcies, tenancies, judgments, tax liens, other liens, first rights of refusal, insurance issues, or governmental actions that could affect title to the property.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19. Room additions or structural changes to the property during your ownership.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20. Problems caused by fire, smoke, or water (including whether any structure on the property has flooded from rising water, water intrusion, or otherwise) to the property during your ownership.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
21. Drainage, soil stability, atmosphere, or underground problems affecting the property.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
22. Erosion, erosion control, or erosion control structure, such as a bulkhead, rock revetment, seawall, or buried sandbags, affecting the property. If "Yes" to Question 22, provide a general description including material, location on the property, approximate size, etc.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
23. Flood hazards, wetlands, flood hazard designations, flood zones, or flood risk affecting the property.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
24. Whether the property is currently insured through public (e.g., National Flood Insurance Program) or private flood insurance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25 Private or public flood insurance (e.g., Federal Emergency Management Agency (FEMA)) claims filed on the property during your ownership. If "Yes" to Question 25, list the approximate date(s), general description of event(s), nature of any repair(s), and amounts of all claim(s).	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
26. Repairs made to the property as a result of flood events that were <u>NOT</u> filed with private or public insurance during your ownership. If "Yes" to Question 26, list the approximate date(s), general description of event(s), nature of any repair(s), and amounts of all flood-related repairs.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
27. Has federal flood disaster assistance (e.g., from FEMA, Small Business Administration, HUD) been previously received during your ownership? If "Yes" to Question 27, what was the amount received and the purpose of the assistance (elevation, mitigation, restoration, etc.)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
28. Whether the property has been assessed for a beach nourishment project during your ownership.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

A. Describe any green energy, recycling, sustainability or disability features for the property:

B. Describe any Department of Motor Vehicles titled manufactured housing on the property:

VI. BURIED, UNBURIED, OR COVERED PRESENCE OF THE FOLLOWING: LEAD BASED PAINT, LEAD HAZARDS, ASBESTOS, RADON GAS, METHANE GAS, STORAGE TANKS, HAZARDOUS MATERIALS, TOXIC MATERIALS, OR ENVIRONMENTAL CONTAMINATION

A. Describe any known property environmental contamination problems from construction, repair, cleaning, furnishing, intrusion, operating, toxic mold, methamphetamine production, lead based paint, lead hazards, asbestos, radon gas, methane gas, formaldehyde, corrosion-causing sheetrock, storage tanks, hazardous materials, toxic materials, environmental contamination, or other: _____

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VII. EXISTENCE OF A RENTAL, RENTAL MANAGEMENT, VACATION RENTAL, OR OTHER LEASE CONTRACT ANTICIPATED TO BE IN PLACE ON THE PROPERTY AT THE TIME OF CLOSING

A. Describe the rental/lease terms, to include any vacation rental periods that reasonably may begin no later than ninety days after the date the purchaser's interest is recorded in the office of the register of deeds, and any rental/leasing problems, if any: _____

B. State the name and contact information for any property management company involved (if any): _____

C. Describe known outstanding charges owed by tenant for gas, electric, water, sewer, and garbage: _____

VIII. EXISTENCE OF A METER CONSERVATION CHARGE, AS PERMITTED BY SECTION 58-37-50 THAT APPLIES TO ELECTRICITY OR NATURAL GAS SERVICE TO THE PROPERTY

A. Describe any utility company financed or leased property on the real property: _____

B. Describe known delinquent charges for real property's gas, electric, water, sewer, and garbage: _____

IX. WHETHER THE PROPERTY IS SUBJECT TO GOVERNANCE OF A HOMEOWNERS ASSOCIATION WHICH CARRIES CERTAIN RIGHTS AND OBLIGATIONS THAT MAY LIMIT THE USE OF THIS PROPERTY AND INVOLVE FINANCIAL OBLIGATIONS

	Yes*	No	No Representation
If Yes, owner must complete the attached Residential Property Disclosure Statement Addendum.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

X. PLEASE USE THE SPACE BELOW FOR "YES" ANSWER EXPLANATIONS AND ATTACH ANY ADDITIONAL SHEETS OR RELEVANT DOCUMENTS AS NEEDED

Owner: WSPRLOT Purchaser () () acknowledge receipt of a copy of this page which is Page 5 of 6.
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This disclosure does not limit the obligation of the purchaser to inspect the property and improvements which are the subject of the real estate contract. Purchaser is solely responsible for conducting their own offsite condition inspections and psychologically affected property inspections prior to entering into a real estate contract. The real estate licensees (acting as listing or selling agents, or other) have no duty to inspect the onsite or offsite conditions of the property and improvements. Purchaser should review all applicable documents (covenants, conditions, restrictions, bylaws, deeds, and similar documents) prior to entering into any legal agreements including any contract. The South Carolina Code of Laws describes the Residential Property Condition Disclosure Statement requirements and exemptions at § 27-50-10 (and following) which can be read online (www.scstatehouse.gov or other websites).

Current status of property or factors which may affect the closing:

- Owner occupied
- Short sale
- Bankruptcy
- Vacant (How long vacant?): 4 months
- Leased
- Foreclosure
- Estate
- Other: _____
- Subject to Vacation/Short Term Rental

A Residential Property Condition Disclosure Statement Addendum is is not completed and attached. This addendum should be attached if the property is subject to covenants, conditions, restrictions, bylaws, rules, or is a condominium.

Owner acknowledges having read, completed, and received a copy of this Residential Property Condition Disclosure Statement before signing and that all information is true and correct as of the date signed.

Owner Signature: Victor Thuckner Date: 5/24/24 Time: _____

Owner Printed Name: Victor Thuckner

Owner Signature: Rebecca L. Steen Thuckner Date: 5-24-2024 Time: _____

Owner Printed Name: Rebecca L. Steen Thuckner

Purchaser acknowledges prior to signing this disclosure:

- Receipt of a copy of this disclosure
- Purchaser has examined disclosure
- Purchaser had time and opportunity for legal counsel
- This disclosure is not a warranty by the real estate licensees
- This disclosure is not a substitute for obtaining inspections of onsite and offsite conditions
- This disclosure is not a warranty by the owner
- Representations are made by the owner and not by the owner's agents or subagents
- Purchaser has sole responsibility for obtaining inspection reports from licensed home inspectors, surveyors, engineers, or other qualified professionals
- Purchaser has sole responsibility for investigating offsite conditions of the property including, but not limited to, adjacent properties being used for agricultural purposes

Purchaser Signature: _____ Date: _____ Time: _____

Purchaser Printed Name: _____

Purchaser Signature: _____ Date: _____ Time: _____

Purchaser Printed Name: _____

Owner: (M) (R) Purchaser () () acknowledge receipt of a copy of this page which is Page 6 of 6. Effective 6/1/2023

SCHEDULE A and UTILITES INFO

ADDRESS 711 Burgess Rd, Silverstreet, SC 29145

Checklist of Appliances and/or personal property to be included with the sale of:

- | | | | |
|--|--|---|---|
| <input checked="" type="checkbox"/> Electric Range/Oven | <input type="checkbox"/> Washing Machine/Dryer | <input checked="" type="checkbox"/> Area Rugs | <input type="checkbox"/> Security System* |
| <input type="checkbox"/> Gas Range/Oven | <input type="checkbox"/> Mirrors/Vanities | <input type="checkbox"/> Fireplace Screen | <input type="checkbox"/> Porch Swing/Bench |
| <input type="checkbox"/> Gas Cooktop | <input type="checkbox"/> Garage Door Remotes | <input type="checkbox"/> Fireplace Tools | <input checked="" type="checkbox"/> Shrubby |
| <input type="checkbox"/> Wall Oven | <input type="checkbox"/> Mini Blinds | <input type="checkbox"/> Wood Stove | <input type="checkbox"/> Clothesline & Poles |
| <input checked="" type="checkbox"/> Refrigerator | <input type="checkbox"/> Plantation Blinds | <input type="checkbox"/> Oil/LP Tank ___ Fuel In Tank | <input type="checkbox"/> Utility Bldg ___# |
| <input type="checkbox"/> Ice maker | <input type="checkbox"/> Window Shades | <input type="checkbox"/> Window AC Unit* ___# | <input type="checkbox"/> Dock |
| <input type="checkbox"/> Freezer | <input type="checkbox"/> Wooden Shutters | <input checked="" type="checkbox"/> Lighting Fixtures | <input type="checkbox"/> Pier |
| <input type="checkbox"/> Bar or 2 nd Refrigerator | <input type="checkbox"/> Storm Windows | <input checked="" type="checkbox"/> Light Bulbs | <input type="checkbox"/> Boat Lift |
| <input type="checkbox"/> Dishwasher | <input type="checkbox"/> Window Screens | <input type="checkbox"/> Satellite System * | <input type="checkbox"/> Mailbox |
| <input type="checkbox"/> Microwave | <input type="checkbox"/> Curtains | <input type="checkbox"/> TV Antenna | <input type="checkbox"/> Shelving |
| <input type="checkbox"/> Trash Compactor | <input type="checkbox"/> Draperies | <input type="checkbox"/> Pool | <input type="checkbox"/> Where? _____ |
| <input type="checkbox"/> Disposal | <input checked="" type="checkbox"/> Ceiling Fans * | <input type="checkbox"/> Pool Equipment | <input type="checkbox"/> Workbench*
Where: _____ |

* If any Items are not Included, please be specific (I.e. antique mirror in half bath will be replaced)

Do you have a WELL or SEPTIC Tank on Property? _____ Where is it located? _____ Last Pumped? _____

Electric Co. Newberry Electric Avg Bill pymt 251
 Water Co. _____ Avg Bill pymt _____
 Gas Co. _____ Tank _____ Owned _____ Leased _____
 Phone Co. _____ Septic Tank - When last pumped: _____
 Cable Co. DISH
 High Speed Internet Available: Yes No Carolina Connect
 Taxes for Previous Year: City \$ _____ County \$ 2,700 @ 4%

Heating and Cooling Info: Type of heat on main level: gas or electric age of system: _____
 upgrades to system: _____ Type of heat on upper/basement level: gas or electric age of system: _____
 All Info listed here is true as per the Seller/s. This shall be used as part of the Seller's Disclosure Statement.

Seller Name Victor Thacker Signature Victor W. Thacker
 Seller Name Rebecca L. Osteen Thacker Signature Rebecca L. Osteen Thacker
 Date: 8/26/24

This Schedule is part of a Contract of Sale. All parties shall sign and date in agreement.
 Buyer Name _____ Signature _____
 Buyer Name _____ Signature _____
 Date: _____

Buyer acknowledges that all inspections are to be completed within 10 business, the contract will reflect same; and that the home appraisal, if required, will be ordered by the Lender within 5 days of contract execution.
 Buyer #1: _____ Buyer #2: _____